

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NA	72192	6/27/00
O.I.P.E. CLASSIFIER		43	7/1/00
FORMALITY REVIEW	J.S.	69134	8-17-2000
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	9/12/00
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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31	✓
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34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	0
42	0
43	0
44	0
45	0
46	0
47	0
48	0
49	0
50	0

Claim	Date
Final Original	
41	9/12/00
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓
51	✓
52	✓
53	✓
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68	✓
69	✓
70	✓
71	✓
72	✓
73	0
74	0
75	0
76	0
77	0
78	0
79	0
80	✓
81	0
82	0
83	0
84	0
85	0
86	✓
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Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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